PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patentee:

HINO

612-455-3801

Examiner:

KINKEAD

Patent No.:

7,053,726

Group Art Unit:

2817

Issued:

May 30, 2006

Docket No.:

10873.1608USWO

Title:

VOLTAGE CONTROL OSCILLATOR HAVING MODULAR FUNCTION

CERTIFICATE UNDER 37 CFR 1.8:

The undersigned hereby certifies this correspondence is being deposited in the United States Postal Service, as first class mail, with sufficient postage, in an envelope addressed to Attn: Certificate of Corrections Branch, Commissioner for Patents, Alexandria, Virginia 22313-1450 on January 2007.

> Name Beuren Sinds

Attn: Certificate of Corrections Branch Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

53148 PATENT TRADEMARK OFFICE

The following papers are transmitted herewith:

Transmittal Sheet in duplicate containing Certificate of Mailing

Supplemental Request for Certificate of Correction

XXXX

PTO Form/SB/44

Return Postcard

Please charge any additional fees or credit overpayment to deposit account 50-3478. A duplicate of this

Hamre, Schumann, Mueller & Larson, P.C. P.O. Box 2902 Minneapolis, MN 55402 612.455-3800

Name: Douglas P. Mueller

Reg. No.: 30,300 Initials: DPM/Is

(PTO TRANSMITTAL - GENERAL)

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patentce:

HINO

Examiner:

KINKEAD

Patent No.:

7,053,726

Group Art Unit:

2817

Issued:

May 30, 2006

Docket No.:

10873.1608USWO

Title:

VOLTAGE CONTROL OSCILLATOR HAVING MODULAR FUNCTION

CERTIFICATE UNDER 37 CFR 1.8:

The undersigned hereby cortifies this correspondence is being deposited in the United States Postal Service, as first class mail, with sufficient postage, in an envelope addressed to: Attn: Certificate of Corrections Branch commissioner for Patents, Alexandria, Virginia 22313-1450 on January 2007.

Attn: Certificate of Corrections Branch

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

53148 PATRINT TRADEMARK OFFICE

Sir:

The following papers are transmitted herewith:

Transmittal Sheet in duplicate containing Certificate of Mailing

Supplemental Request for Certificate of Correction

PTO Form/SB/44

Return Postcard

Please charge any additional fees or credit overpayment to deposit account 50-3478. A duplicate of this sheet is enclosed.

Hamre, Schumann, Mueller & Larson, P.C. P.O. Box 2902 Minneapolis, MN 55402

612.455-3800

Name: Houglas P. Mueller

Reg. No.: 30,300 Initials: DPM/Is

(PTO TRANSMITTAL - GENERAL)